

**WISCONSIN WORKS (W2) EMPLOYABILITY PLAN**  
**Proposed for W2 Extension Period**

<b>Participant:</b>		<b>SSN:</b>	<b>PIN:</b>
<b>Date Submitted:</b> 06/17/05	<b>Office:</b>	<b>FEP XMI #:</b> _____ <b>FEP Name:</b> _____	

**PART 1 – PARTICIPANT EMPLOYMENT AND RELATED GOALS**

**JOB GOALS DURING PROGRAM PARTICIPATION:**

**JOB TITLE**

**JOB (DOT) CODE**

PRIMARY: Secure Receptionist Position

SECONDARY: Secure General Office Work (Filing, Mailroom, etc.)

ADDITIONAL: Work in Retail Sales, perhaps as a second job at night

**RELATED GOALS NOT REQUIRED FOR PROGRAM PARTICIPATION:**

LONG-TERM: Complete schooling for Business at UW-Milwaukee and advance to better paying job

SHORT-TERM: Spend at least 6 hours per day in job search, goal of securing employment by July 15<sup>th</sup>, 2005

**PART 2 – PARTICIPANT PERSONAL GOALS**  
**(Not required for program participation)**

1. Work with children on homework as a scheduled activity every night
2. Improve contact with children's teachers (bi-weekly phone calls)
3. Attend homeownership classes through Neighborhood Center
4. Start saving money for homeownership

**PART 3 – PARTICIPANT PROGRAM ACTIVITY PLAN**  
**(Required for program participation)**

The participant program activity will begin on 06/17/05, and will be reviewed on 07/22/05.

During this time, the W2 placement is a CMS, Case Management Services for a Job Ready Individual. W-2 placement may end if a new Employability Plan is not completed by the review date.

The participant program activity plan will help you meet your goal to get a job. It lists the activities that will assist you in getting a job. Your FEP will meet with you to talk about your progress and make changes to your plan, if needed.

**ACTIVITY 1: Attend Job Club Weekly**

**HOURS PER WEEK: 2**

**PLANNED BEGIN AND END DATES: 06/17/05 – 07/22/05**

**PROVIDER OF SERVICE: YWCA of Greater Milwaukee**

**ASSIGNMENT TIME/S: Tuesdays, 9:00am – 11:00am**

**REMARKS: Remember to punch in using your Employment Resource Center timecard.**

**ACTIVITY 2: Search for job leads in the Employment Resource Center (ERC)**

**HOURS PER WEEK 3**

**PLANNED BEGIN AND END DATES: 06/27/05 – 07/22/05**

**PROVIDER OF SERVICE: YWCA of Greater Milwaukee**

**ASSIGNMENT TIME/S: The ERC is open M, T, Th, F 8:00am – 5:00pm and W 8:00am – 7:00pm**

**REMARKS: Remember to punch-in using the Employment Resource Center timecard! Use the JobNet, the internet, and meet one-on-one with our Employment Specialists (you can walk-in, or schedule an appointment in advance by calling 267-3291 and asking for Sophia.)**

**ACTIVITY 3: Apply for Jobs!**

**HOURS PER WEEK 25**

**PLANNED BEGIN AND END DATES: 06/27/05 – 07/22/05**

**PROVIDER OF SERVICE: YWCA of Greater Milwaukee**

**ASSIGNMENT TIME/S: Every day, aim for a minimum of 5 hours/day.**

**REMARKS: Apply in-person, via fax, and online. Follow the employer's instructions for application submission. Refer to your Employment Search Cooperation Agreement for more details. Turn in a minimum of 13 job contacts at your weekly FEP appointment. Be sure to include all employer contact details on the log.**

**ACTIVITY 4: Attend all weekly FEP appointments**

**HOURS PER WEEK 1**

**PLANNED BEGIN AND END DATES: 06/27/05 – 07/22/05**

**PROVIDER OF SERVICE: YWCA of Greater Milwaukee**

**ASSIGNMENT TIME/S: Your scheduled appointments are as follows:  
07/05/05 at 10:00am, 07/12/05 at 10:00am, 07/19/05 at 10:00am, and 07/26/05 at 10:00am.**

**REMARKS: Bring your employer contact logs with you to each appointment. Together we will review your job search progress, talk about successes and challenges, and make a follow-up plan.**

I have agreed that I will do the activities listed in this Employment Plan. I know that I must do these activities to receive my W2 payments, which include childcare and transportation. I know if I don't do these activities, (including keeping all appointments, completing up-front job search, accepting a job, and keeping a job), my W2 placement may end for non-cooperation. I understand that the CMS placement involves intensive case management to assist me in becoming employed as soon as possible. I accept this intensive case management and am committed to securing employment as soon as possible.

**PARTICIPANT SIGNATURE \_\_\_\_\_**

**DATE SIGNED \_\_\_\_|\_\_\_\_|\_\_\_\_**

**I have provided an explanation of the conditions and requirements for the activities listed and have provided the opportunity to answer the participant's questions.**

**FEP SIGNATURE \_\_\_\_\_**

**DATE SIGNED \_\_\_\_|\_\_\_\_|\_\_\_\_**

**COMMENTS: \_\_\_\_\_**  
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